

<i>SERFF Tracking Number:</i>	<i>HARL-126790484</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Hartford Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46629</i>
<i>Company Tracking Number:</i>	<i>IPD-VA-3OUT-10(HL)</i>		
<i>TOI:</i>	<i>A03I Individual Annuities - Deferred Variable</i>	<i>Sub-TOI:</i>	<i>A03I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>HPRM L Share</i>		
<i>Project Name/Number:</i>	<i>HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)</i>		

Filing at a Glance

Company: Hartford Life Insurance Company

Product Name: HPRM L Share

TOI: A03I Individual Annuities - Deferred
Variable

Sub-TOI: A03I.002 Flexible Premium

Filing Type: Form

SERFF Tr Num: HARL-126790484 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num: 46629

Co Tr Num: IPD-VA-3OUT-10(HL) State Status: Approved-Closed

Reviewer(s): Linda Bird

Authors: Kenneth Bach, Lindsay
Cooper, Ginger Morgan, Tiffany

Heist

Date Submitted: 08/27/2010

Disposition Date: 08/31/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: HPRM L Share Spec Page Filing

Project Number: IPD-VA-3OUT-10(HL)

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 08/31/2010

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 08/31/2010

Created By: Lindsay Cooper

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Lindsay Cooper

Filing Description:

Hartford Life Insurance Company - NAIC 88072-091; FEIN 06-0974148

VA-3OUT-10 Individual Variable Annuity Contract Specifications

Enclosed is the captioned Individual Variable Annuity policy form for your review and approval. This form is new and does not replace any previously approved forms. This form will be used with our previously approved Individual Variable Annuity Contract and related forms as described below.

SERFF Tracking Number: HARL-126790484 State: Arkansas
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Company Tracking Number: IPD-VA-3OUT-10(HL)
TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium
Product Name: HPRM L Share
Project Name/Number: HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)

Please note that this form is identical to the form that we are submitting concurrently via a separate filing for the Hartford Life and Annuity Insurance Company except for the Company reference. We suggest that you review the two submissions together.

Contract Specifications: VA-3OUT-10. This form is an alternate Contract Specifications for our Individual Variable Annuity Contract HL-VA03 which was approved by your state on 02/20/2003. We have also enclosed an Actuarial Memorandum for this form which provides additional information regarding this product.

This form will be used for both qualified and non-qualified markets and will be sold by professional, licensed agents in connection with retirement planning.

The bracketed items are variable and may be modified on a non-discriminatory basis. We have enclosed a Statement of Variables for this form which describes the bracketing parameters.

Since this form will be used with SEC registered product(s) we believe it is exempt from the language simplification requirements of your state. Unless otherwise informed, we reserve the right to alter the layout, format, color and typeface of this form.

If you have any questions regarding this submission please contact me at (860) 843-3552 or Kenneth Bach at (860) 843-7424. We look forward to your approval of these forms.

Sincerely,
Lindsay Cooper
Contract Specialist
Retirement & Legacy Compliance
(860) 843-3552
Lindsay.Cooper@hartfordlife.com

Company and Contact

Filing Contact Information

Lindsay Cooper, Contract Analyst
200 Hopmeadow Street
Simsbury, CT 06089

lindsay.cooper@hartfordlife.com
860-843-3552 [Phone]
860-843-8014 [FAX]

Filing Company Information

Hartford Life Insurance Company
200 Hopmeadow Street
Simsbury, CT 06089

CoCode: 88072
Group Code: 91
Group Name:

State of Domicile: Connecticut
Company Type: Life
State ID Number:

SERFF Tracking Number: HARL-126790484 State: Arkansas
Filing Company: Hartford Life Insurance Company State Tracking Number: 46629
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TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium
Product Name: HPRM L Share
Project Name/Number: HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)
(860) 547-5000 ext. [Phone] FEIN Number: 06-0974148

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Hartford Life Insurance Company	\$50.00	08/27/2010	39075026

SERFF Tracking Number: *HARL-126790484* *State:* *Arkansas*
Filing Company: *Hartford Life Insurance Company* *State Tracking Number:* *46629*
Company Tracking Number: *IPD-VA-3OUT-10(HL)*
TOI: *A03I Individual Annuities - Deferred Variable* *Sub-TOI:* *A03I.002 Flexible Premium*
Product Name: *HPRM L Share*
Project Name/Number: *HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)*

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	08/31/2010	08/31/2010

<i>SERFF Tracking Number:</i>	<i>HARL-126790484</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>HPRM L Share</i>		
<i>Project Name/Number:</i>	<i>HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)</i>		

Disposition

Disposition Date: 08/31/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>HARL-126790484</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Hartford Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>46629</i>
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<i>TOI:</i>	<i>A03I Individual Annuities - Deferred Variable</i>	<i>Sub-TOI:</i>	<i>A03I.002 Flexible Premium</i>
<i>Product Name:</i>	<i>HPRM L Share</i>		
<i>Project Name/Number:</i>	<i>HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variables		Yes
Form	Contract Specifications		Yes

SERFF Tracking Number: HARL-126790484 State: Arkansas

Filing Company: Hartford Life Insurance Company State Tracking Number: 46629

Company Tracking Number: IPD-VA-3OUT-10(HL)

TOI: A03I Individual Annuities - Deferred Variable Sub-TOI: A03I.002 Flexible Premium

Product Name: HPRM L Share

Project Name/Number: HPRM L Share Spec Page Filing/IPD-VA-3OUT-10(HL)

Form Schedule

Lead Form Number: VA-3OUT-10

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	VA-3OUT-10	Policy/Cont Contract ract/Fratern Specifications al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0.000	VA-3OUT-10.pdf

CONTRACT SPECIFICATIONS

CONTRACT NUMBER	[SPECIMEN]	CONTRACT ISSUE DATE	[SEPTEMBER 8, 2010]
NAME OF ANNUITANT	[JAMES SCOTT]	ANNUITY COMMENCEMENT DATE	[JANUARY 1, 2039]
ANNUITANT AGE	[35]	INITIAL PREMIUM PAYMENT	[\$1,000]
ANNUITANT GENDER	[MALE]	MINIMUM SUBSEQUENT PAYMENT	[\$500]
CONTINGENT ANNUITANT	[PAUL SCOTT]		
DESIGNATED BENEFICIARY	[ANN SCOTT]		
CONTRACT OWNER	[JAMES SCOTT]		

DESCRIPTION OF BENEFITS

INDIVIDUAL FLEXIBLE PREMIUM VARIABLE ANNUITY CONTRACT

SEPARATE ACCOUNT: [HARTFORD LIFE INSURANCE COMPANY SEPARATE ACCOUNT SEVEN]

MORTALITY AND EXPENSE RISK CHARGE: [1.25%] PER ANNUM OF THE DAILY SUB-ACCOUNTS VALUE.

ADMINISTRATION CHARGE: [0.20%] PER ANNUM OF THE DAILY SUB-ACCOUNTS VALUE.

ANNUAL MAINTENANCE FEE: \$0 IF THE CONTRACT VALUE IS \$50,000 OR MORE ON THE CONTRACT ANNIVERSARY. \$[30] IF THE CONTRACT VALUE IS LESS THAN \$50,000 ON THE CONTRACT ANNIVERSARY AND WHEN THE CONTRACT IS FULLY SURRENDERED.

MINIMUM AMOUNT RULE: THE MINIMUM AMOUNT RULE OF THE "PARTIAL SURRENDERS PRIOR TO THE ANNUITY COMMENCEMENT DATE" SECTION OF THE CONTRACT PROVIDES THAT A MINIMUM CONTRACT VALUE MUST BE MAINTAINED IN THE CONTRACT. AS OF THE CONTRACT ISSUE DATE, THE MINIMUM CONTRACT VALUE EQUALS [\$2,000]. WE RESERVE THE RIGHT TO INCREASE THE MINIMUM CONTRACT VALUE AT OUR DISCRETION, BUT IN NO EVENT WILL IT EXCEED \$10,000.

ANNUAL WITHDRAWAL AMOUNT (AWA): THE AMOUNT THAT CAN BE WITHDRAWN IN ANY CONTRACT YEAR PRIOR TO INCURRING SURRENDER CHARGES. THIS EQUALS 100% OF REMAINING GROSS PREMIUMS MADE MORE THAN [4] YEARS AGO PLUS THE GREATER OF (A) OR (B) WHERE:

(A) = CONTRACT VALUE AS OF THE VALUATION DAY OF THE WITHDRAWAL MINUS REMAINING GROSS PREMIUMS.

CONTRACT SPECIFICATIONS

(B) = [5%] OF PREMIUM PAYMENTS MADE DURING EACH OF THE LAST [4] YEARS PRIOR TO WITHDRAWAL PER CONTRACT YEAR ON A NONCUMULATIVE BASIS.

AWA FORMULA:

AWA = REMAINING GROSS PREMIUMS NO LONGER SUBJECT TO CONTINGENT DEFERRED SALES CHARGE + MAXIMUM (EARNINGS, [5%] OF PREMIUM PAYMENTS STILL SUBJECT TO CONTINGENT DEFERRED SALES CHARGE) WHERE:

REMAINING GROSS PREMIUMS (RGP) = TOTAL PREMIUM PAYMENTS – PRIOR WITHDRAWALS IN EXCESS OF THE AWA AT THE TIME OF THAT WITHDRAWAL; AND EARNINGS = MAXIMUM (CONTRACT VALUE – RGP, 0).

CONTINGENT DEFERRED SALES CHARGE (CHARGE):

WE MAY ASSESS A CONTINGENT DEFERRED SALES CHARGE WHEN YOU REQUEST A FULL OR PARTIAL SURRENDER. THE CHARGE IS BASED ON THE AMOUNT YOU CHOOSE TO SURRENDER AND HOW LONG YOUR PREMIUM PAYMENTS HAVE BEEN IN THE CONTRACT. EACH PREMIUM PAYMENT HAS ITS OWN CHARGE SCHEDULE. PREMIUM PAYMENTS ARE SURRENDERED IN THE ORDER IN WHICH THEY ARE RECEIVED. THE AMOUNT ASSESSED A CHARGE WILL NOT EXCEED YOUR REMAINING GROSS PREMIUMS AS DEFINED ABOVE. AMOUNTS WITHDRAWN IN EXCESS OF THE ANNUAL FREE WITHDRAWAL AMOUNT ARE SUBJECT TO THE CHARGE.

THE CHARGE WILL BE CALCULATED BASED ON THE GREATER OF (A) OR (B), WHERE:

(A) = CONTRACT VALUE AS OF THE DATE OF THE WITHDRAWAL MINUS THE APPLICABLE ANNUAL WITHDRAWAL AMOUNT.

(B) = REMAINING GROSS PREMIUM AS DEFINED ABOVE MINUS THE APPLICABLE ANNUAL WITHDRAWAL AMOUNT.

FOR PARTIAL SURRENDERS, THE CHARGE WILL BE CALCULATED BASED ON THE PARTIAL SURRENDER AMOUNT AS OF THE DATE OF THE WITHDRAWAL MINUS THE APPLICABLE ANNUAL WITHDRAWAL AMOUNT.

THE PERCENTAGES USED TO CALCULATE THE CHARGE ARE EQUAL TO:

CHARGE	NUMBER OF YEARS FROM EACH PREMIUM PAYMENT
[7%	1
6%	2
5%	3
4%	4
0%	5] AND THEREAFTER

NO CONTINGENT DEFERRED SALES CHARGE WILL BE ASSESSED IF:

- ONLY THE ANNUAL WITHDRAWAL AMOUNT IS TAKEN, OR
- ELIGIBILITY REQUIREMENTS ARE MET FOR THE WAIVER OF THE CONTINGENT DEFERRED SALES CHARGE.

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Supporting Document Schedules

	Item Status:	Status
		Date:
Satisfied - Item:	Statement of Variables	
Comments:		
Attachment:		
Statement of Variables VA-3OUT-10 .pdf		

STATEMENT OF VARIABLES

**Hartford Life Insurance Company
Individual Flexible Premium Variable Annuity Contract Specifications
Form Number: VA-3OUT-10
August 27, 2010**

The bracketed items are variable and may be modified on a non-discriminatory basis. The following information describes the usage and possible future modifications to the bracketed variable material of the captioned policy form.

CONTRACT SPECIFICATIONS PAGE NUMBER	VARIABLE ITEM	DESCRIPTION
3	MINIMUM SUBSEQUENT PAYMENT [\$500]	For new issues we may change the bracketed amount that is currently displayed to another amount ranging from \$50 - \$1000.
3	SEPARATE ACCOUNT: [SEPARATE ACCOUNT SEVEN]	For new issues, we may change the bracketed name that is currently displayed to show the name of another valid Separate Account of our company.
3	MORTALITY AND EXPENSE RISK CHARGE: [1.25%] PER ANNUM OF THE DAILY SUB-ACCOUNTS VALUE.	For new issues, we may change the amount displayed to another amount ranging from 0.00% to 1.70%.
3	ADMINISTRATION CHARGE: [0.20%] PER ANNUM OF THE DAILY SUB-ACCOUNTS VALUE.	For new issues, we may change the amount displayed to another amount ranging from 0.00% to 0.25%.
3	ANNUAL MAINTENANCE FEE: \$0 IF THE CONTRACT VALUE IS \$50,000 OR MORE ON THE CONTRACT ANNIVERSARY. \$[30] IF THE CONTRACT VALUE IS LESS THAN \$50,000 ON THE CONTRACT ANNIVERSARY AND WHEN THE CONTRACT IS FULLY SURRENDERED	For new issues, we may change the bracketed amount displayed to another amount ranging from \$0 - \$50.

3	<p>MINIMUM AMOUNT RULE: THE MINIMUM AMOUNT RULE OF THE "PARTIAL SURRENDERS PRIOR TO THE ANNUITY COMMENCEMENT DATE" SECTION OF THE CONTRACT PROVIDES THAT A MINIMUM CONTRACT VALUE MUST BE MAINTAINED IN THE CONTRACT. AS OF THE CONTRACT ISSUE DATE, THE MINIMUM CONTRACT VALUE EQUALS [\$2,000]. WE RESERVE THE RIGHT TO INCREASE THE MINIMUM CONTRACT VALUE AT OUR DISCRETION, BUT IN NO EVENT WILL IT EXCEED \$10,000.</p>	For all issues, We may change the bracketed amount displayed to another amount ranging from \$2,000 - \$10,000.
3A	<p>ANNUAL WITHDRAWAL AMOUNT (AWA): THE AMOUNT THAT CAN BE WITHDRAWN IN ANY CONTRACT YEAR PRIOR TO INCURRING SURRENDER CHARGES. THIS EQUALS 100% OF REMAINING GROSS PREMIUMS MADE MORE THAN [4] YEARS AGO PLUS THE GREATER OF (A) OR (B) WHERE:</p> <p>(A) = CONTRACT VALUE AS OF THE VALUATION DAY OF THE WITHDRAWAL MINUS REMAINING GROSS PREMIUMS.</p> <p>(B) = [5%] OF PREMIUM PAYMENTS MADE DURING EACH OF THE LAST [4] YEARS PRIOR TO WITHDRAWAL PER CONTRACT YEAR ON A NONCUMULATIVE BASIS.</p> <p>AWA FORMULA: AWA = REMAINING GROSS PREMIUMS NO LONGER SUBJECT TO CONTINGENT DEFERRED SALES CHARGE + MAXIMUM (EARNINGS, [5%] OF PREMIUM PAYMENTS STILL SUBJECT TO CONTINGENT DEFERRED SALES CHARGE) WHERE: REMAINING GROSS PREMIUMS (RGP) = TOTAL PREMIUM PAYMENTS – PRIOR WITHDRAWALS IN EXCESS OF THE AWA AT THE TIME OF THAT WITHDRAWAL; AND EARNINGS = MAXIMUM (CONTRACT VALUE – RGP, 0).</p>	<p>For new issues, we may change the bracketed number of contract years that is currently displayed to other years ranging from 0 – 4.</p> <p>For new issues, we may change the bracketed percentage that is currently displayed to another percentage ranging from 0 – 10%. However, for Charitable Remainder Trust business we may increase the percentage to 20%.</p>
3A	<p>CONTINGENT DEFERRED SALES CHARGE (CHARGE):</p> <p>WE MAY ASSESS A CONTINGENT DEFERRED SALES CHARGE WHEN YOU REQUEST A FULL OR PARTIAL SURRENDER. THE CHARGE IS BASED ON THE AMOUNT YOU CHOOSE TO SURRENDER AND HOW LONG YOUR PREMIUM PAYMENTS HAVE BEEN IN THE CONTRACT. EACH PREMIUM PAYMENT HAS ITS OWN CHARGE SCHEDULE. PREMIUM PAYMENTS ARE SURRENDERED IN THE ORDER IN WHICH THEY ARE RECEIVED. THE AMOUNT ASSESSED A CHARGE WILL NOT EXCEED YOUR REMAINING GROSS PREMIUMS AS DEFINED ABOVE. AMOUNTS WITHDRAWN IN EXCESS OF THE ANNUAL FREE WITHDRAWAL AMOUNT ARE SUBJECT TO THE CHARGE.</p> <p>THE CHARGE WILL BE CALCULATED BASED ON THE GREATER OF (A) OR (B), WHERE:</p> <p>(A) = CONTRACT VALUE AS OF THE DATE OF THE WITHDRAWAL MINUS THE</p>	The bracketed Contingent Deferred Sales Charge that is displayed is the maximum charge that we may assess for each of the years shown. For new issues we may change the percentage for any of these years to a lower percentage amount.

	APPLICABLE ANNUAL WITHDRAWAL AMOUNT.													
	(B) = REMAINING GROSS PREMIUM AS DEFINED ABOVE MINUS THE APPLICABLE ANNUAL WITHDRAWAL AMOUNT.													
	FOR PARTIAL SURRENDERS, THE CHARGE WILL BE CALCULATED BASED ON THE PARTIAL SURRENDER AMOUNT AS OF THE DATE OF THE WITHDRAWAL MINUS THE APPLICABLE ANNUAL WITHDRAWAL AMOUNT.													
	THE PERCENTAGES USED TO CALCULATE THE CHARGE ARE EQUAL TO:													
	<table><tr><th>CHARGE</th><th>NUMBER OF YEARS FROM EACH PREMIUM PAYMENT</th></tr><tr><td>[7%</td><td>1</td></tr><tr><td>6%</td><td>2</td></tr><tr><td>5%</td><td>3</td></tr><tr><td>4%</td><td>4</td></tr><tr><td>0%</td><td>5] AND THEREAFTER</td></tr></table>	CHARGE	NUMBER OF YEARS FROM EACH PREMIUM PAYMENT	[7%	1	6%	2	5%	3	4%	4	0%	5] AND THEREAFTER	
CHARGE	NUMBER OF YEARS FROM EACH PREMIUM PAYMENT													
[7%	1													
6%	2													
5%	3													
4%	4													
0%	5] AND THEREAFTER													
	NO CONTINGENT DEFERRED SALES CHARGE WILL BE ASSESSED IF:													
	<ul style="list-style-type: none">• ONLY THE ANNUAL WITHDRAWAL AMOUNT IS TAKEN, OR• ELIGIBILITY REQUIREMENTS ARE MET FOR THE WAIVER OF THE CONTINGENT DEFERRED SALES CHARGE.													